

AGENDA

Public Health Improvement Partnership

Workforce Development Committee

Wednesday, August 25, 2004

9:00am – 10:30am via conference call

To participate, dial: (360) 709-4803, PIN 2340, press #

Marie to dial: (360) 709-4802, PIN 2340, press #

Co-Chairs: Sue Grinnell, Cowlitz Co.; Jack Thompson, UW.

Members: Joan Brewster, DOH; Charlene Crow-Shambach, Snohomish; Kathy Deuel, DOH; Dorothy Gist, DOH; Nancy Goodloe, Kittitas; Maryanne Guichard, DOH; Vic Harris, Tacoma-Pierce; Keith Higman, Island; Vicki Kirkpatrick, WSALPHO; Dennis Klukan, Yakima; David Koch, DIS; Debbie Lee, DOH; Marianne Patton, Chelan-Douglas; Marianne Seifert, SBOH; Margaret Shield, UW; SBOH Corinne Story, Skagit; Patty Swanson, Thurston; Pam Walker, Clark. (Strikeout = RSVP indicates individual is not able to participate in this meeting).

Guest: Alice Porter, PHIP Editor

Staff: Marie Flake, DOH; Wendy Holden, DOH; Janice Taylor, DOH.

PUBLIC HEALTH
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Topic / Description	Materials
Welcome & Introductions – Sue	
Developing Recommendations – Marie Meeting Purpose – select 3-5 broad recommendations to be developed for publication in the 2004 PHIP. These will provide the basis for next biennium's work plan. Background – Each PHIP chapter, 3-5 pages in length, generally includes: introductory comments about key concepts, challenges and opportunities; description of progress on previously published recommendations, a.k.a. accomplishments; and recommendations. Additional key material can be placed in the appendix – i.e. in 2002 the Proposed Public Health Competencies were published in the appendix. In 2002, overall theme of the PHIP could be summarized as threats (terrorism) and threats to public health (reduced funding). These themes are echoed in the WFD chapter introductory comments. The 2004 PHIP will likely focus on something around performance improvement and consistency – we made recommendations and planned activities and we are accomplishing them. The committee will have a hand in shaping the WFD chapter, including text, photos, graphs/diagrams, and contents of the appendix over the coming months. Today's task is to focus on the recommendations. The WFD committee has had rich discussions about possible recommendations at both the April and June meetings. These discussions generated many far reaching ideas about needed improvements in the system. Both of these discussions are summarized in the June meeting notes. Last week the WFD committee chairs and staff met to review this material, synthesize, and develop a selection of draft recommendations for the committee to work with during this call. As you will see, often, these are not complete sentences, but rather broad ideas. Today's task is to select (or create new ones) 3 – 5 ideas to develop for publication and begin to coalesce around what should be included in each of these broad recommendations. We will not be "wordsmithing" today. The draft recommendations are numbers only to aid our discussion and do not reflect any rank order or prioritization.	<ul style="list-style-type: none">•2002 PHIP WFD Chapter•Notes from June WFD Meeting

Topic / Description	Materials
<p>Draft Recommendations for Discussion –</p> <ol style="list-style-type: none"> 1. LMS – adopt, implement, use...for the following purposes....every LHJ and DOH division/program to use....LMS to contain.....LMS to integrate PHIP and other competency sets.... 2. Develop and deliver in a variety of ways, needed content – as defined by the training / performance improvement plan; public health 101; management training; leadership development;and link to the PHIP competencies. 3. Seek to establish loan repayment, tuition reimbursement, recruitment and retention resources and delivery of training to public health workers in their communities while working, similar to those provided by the federal Health Services and Resources Administration (HRSA) for primary care providers.link to Everybody Counts data – use this data like HRSA uses its health professions data – i.e. to establish health professional shortage areas (HPSA), etc.... 4. Everybody Counts – define the process for routinely conducting this census (i.e. every 3-5 years) and expanding, to include public health partners, who is counted. 5. Proposed PHIP Competencies – adopt? Use as is, evaluate and make recommendations to tweak.....Link to LMS. 6. Describe the basic or core training that is needed, by public health workers, at different levels and study / evaluate the usefulness of certification / credentialing at different levels. 7. Six-state WFD Network – continue. PLACEHOLDER. 8. Leadership - continued commitment to develop leaders; to develop and implement <u>many strategies</u> to develop leaders; continue support of the Northwest Public Health Leadership Institute (NWPHLI). 9. Diversity - ???? What to recommend? What to do? Use data from Everybody Counts to..... 10. Incentives for workforce development – explore and document non-financial incentives; explore and document different strategies for providing financial incentives (i.e. Yakima's system) 	
<p>Wrap-up – Next Steps</p>	
<p>Project Updates (time permitting)</p> <ul style="list-style-type: none"> • Training / Performance Improvement Plan (Janice) <ul style="list-style-type: none"> New Coalitions and Alliances Results-based Accountability Program Evaluation Pilot Project Orientations • LMS (Wendy) • Everybody Counts (Janice) 	<p>Written updates will be sent soon, via e-mail, so all committee members may review.</p>

WFD Communication Tools: <http://www.doh.wa.gov/phip/WorkforceDevelopment/default.htm>
2004 Meeting Dates: June 4; August 25; November 4
Routine Meeting Place: Prime Hotel (formerly the Wyndham), 18118 Pacific Highway South, SeaTac, WA